



MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
CMI INTOXILYZER 5000 MAINTENANCE REPORT

RECEIVED
2010 Breath Alcohol Program
By Carol Day at 9:57 am, Mar 01, 2010

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; Retain original in department file. *Expires After 03-28-10*

INTOXILYZER 5000 SN

66005095

DATE OF INSPECTION

02/21/2010

LOCATION OF INSTRUMENT (STREET AND CITY)

Dexter P.D. 305 Cooper Dexter MO 63841

TIME OF INSPECTION

2345 hours

CHECKLIST

Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☒ DVM TEST: (.350 ± .150) *.371* *Passed*

☒ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) *Passed*

☒ CHARACTER DISPLAY TEST *Passed*

☒ PRINT TEST (PRINTOUT ATTACHED) *Passed*

☒ TIME AND DATE *Passed*

☒ CALIBRATION CHECK —

Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (USE CAL. CHECK MODE) (PRINTOUT ATTACHED)

☒ 0.100% STANDARD — MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

☐ 0.040% STANDARD — MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1

.100

TEST 2

.100

TEST 3

.101

☒ SIMULATOR TEMPERATURE (34° ± .2°C) *34.00°C* *Passed*

☒ PERFORM RFI TEST (PRINTOUT ATTACHED) *Passed*

☒ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF SUBJECT BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

REFUSALS

1

0-.04

0

.05-.09

0

.10-.14

1

.15-.19

0

Over .19

0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

This instrument is within ALL OFF the Missouri Department of Health Rules AND Regulations.

Repro - Lot 09001 - Bottle # 0458 - Expiration Date 04-20-2011

INSPECTING OFFICER

SIGNATURE

[Signature]

PRINT NAME

Sgt Joshua T. Benton

TYPE II PERMIT NUMBER EXPIRATION DATE

920217

09-20-2011

TELEPHONE NUMBER

573-624-5510

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 09001

EXPIRATION DATE: April 22, 2011 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 09001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1214 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is April 23, 2009.
The expiration date for this lot number is April 22, 2011
at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President
RepCo Marketing, Inc.

02/22/2019
00:14

[illegible]

PRINTER CHECK:
 ABCDEFGHIJKLMNOPQRSTUVWXYZ
 0123456789

SUBJECT'S NAME

TIME FIRST OBSERVED

INSTRUMENT LOCATION

ADDITIONAL INFORMATION AND/OR REMARKS



SUBJECT'S NAME

TIME FIRST OBSERVED

INSTRUMENT LOCATION:

ADDITIONAL INFORMATION AND/OR REMARKS



SN 66-005095
 E/35.23
 INVALID TEST
 INHIBITED - RFI

02/22/2010
 00:15

DENVER POLICE DEPARTMENT
 INTOXILYZER - ALCOHOL ANALYZER
 NO MODEL 5000 SN 66-005095
 02/22/2010

TEST	2BAC	TIME
AIR BLANK	.000	00:15
CAL. CHECK	.100	00:16
AIR BLANK	.000	00:16
CAL. CHECK	.100	00:16
AIR BLANK	.000	00:17
CAL. CHECK	.101	00:17
AIR BLANK	.000	00:17

NO RFI PRESENT

Maintenance Reports

SUBJECT'S NAME

2345

Denver P.D.

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature]

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER® INSTRUMENT PRINTER CARD

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CMI_{INC.}

Maintenance Reports

SUBJECT'S NAME

2345

Denver P.D.

TIME FIRST OBSERVED

INSTRUMENT LOCATION

[Signature]

OPERATOR

ADDITIONAL INFORMATION AND/OR REMARKS

INTOXILYZER® INSTRUMENT PRINTER CARD

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CMI_{INC.}

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JOSHUA T BENTON

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

INTOXILYZER 5000

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/22/09

Number 920217

Expires 09/22/2011

MO 580-0771 (7-88)


Interim Director
Director of State Public Health Laboratory


Director, Department of Health

Lab. 4 (R7-88)